ISSUE SLIP STAPLE AREA (for additional cross references)

PÖSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION			
O.I.P.E. CLASSIFIER	,	127	10 100
FORMALITY REVIEW	/ (X	007	12-18-00
RESPONSE FORMALITY REVIEW	/00		4-2-01

INDEX OF CLAIMS

~	Rejected	N Non-elec	tod
	Allowed	IInterferer	
-	(Through numeral) Canceled	A Appeal	100
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÷	Restricted 0	Objected
Claim Date	Claim Date	Claim Date
Final Original	Final Original	<u>a</u>
	51	Final
2	52	101
3	53	102
	54	103
5	55	104
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	61	110
12//	62	111
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If more than 150 claims or 10 actions staple additional sheet here

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